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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your	full name		
	your of pictur exam licens Bring identi	the name that is on government-issued re identification (for ple, your driver's se or passport). your picture fication to your and with the trustee.	Kenyon First name Raymond Middle name Thompson Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
	moou	ng with the trustee.		
2.		ther names you have in the last 8 years		
		de your married or en names.		
3.	your numb Indivi	the last 4 digits of Social Security per or federal idual Taxpayer ification number	xxx-xx-5892	

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Case number (if known)

Debtor 1 Kenyon Raymond Thompson

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 604 Broadway Avenue Sterling, IL 61081 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Whiteside County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Document Debtor 1 Kenyon Raymond Thompson

Case number (if known)

ar	Tell the Court About	Your Ba	ankruptcy Ca	se			
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required</i> of page 1 and check the appropri	by 11 U.S.C. § 342(b) for Individuals Filing for iate box.	Bankruptcy
	choosing to file under	Chapter 7					
		☐ Ch	napter 11				
		☐ Ch	napter 12				
		☐ Ch	napter 13				
3.	How you will pay the fee		about how yo	u may pay. Typ attorney is subr	oically, if you are paying the fee	neck with the clerk's office in your local court for yourself, you may pay with cash, cashier's chehalf, your attorney may pay with a credit care	neck, or money
						otion, sign and attach the Application for Indiv	iduals to Pay
			ū		s (Official Form 103A). rived (You may request this op	tion only if you are filing for Chapter 7. By law	, a judge may,
			but is not requapplies to you	uired to, waive y ur family size ar	your fee, and may do so only if nd you are unable to pay the fe	your income is less than 150% of the official e in installments). If you choose this option, you flicial Form 103B) and file it with your petition	poverty line that ou must fill out
).	Have you filed for bankruptcy within the	■ No					
	last 8 years?	☐ Ye	S.				
			District				
			District		When		
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ No	1				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	S.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	□ No	. Go to li	ine 12.			
	residence?	■ Ye	s. Has yo	ur landlord obta	ained an eviction judgment aga	inst you and do you want to stay in your resid	ence?
				No. Go to line	12.		
				Yes. Fill out In bankruptcy pet		on Judgment Against You (Form 101A) and file	e it with this

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Debtor 1	Kenyon Raymond Thompson	Document	Page 4 of 54	Case number (if known)	

Part	3: Report About Any Bu	sinesses `	You Own	as a Sole Propriet	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numbe	er, Street, City, Stat	te & ZIP Code
	it to this petition.		Check	the appropriate bo	x to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	9
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance she operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow in 11 U.S.C. 1116(1)(B).			
	For a definition of small	No.	I am n	ot filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fil Code.	ing under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am fil	ing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and	■ No. ☐ Yes.	What is t	he hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			ate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	
					Number, Street, City, State & Zip Code

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Debtor 1 Kenyon Raymond Thompson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Page 6 of 54 Document Case number (if known) Debtor 1 **Kenyon Raymond Thompson** Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50,000 estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, /s/ Kenyon Raymond Thompson Signature of Debtor 2 **Kenyon Raymond Thompson** Signature of Debtor 1 Executed on March 30, 2016 Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Kenyon Raymond Thompson

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel	A. Springer	Date	March 30, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Daniel A. S	Springer		
Printed name			
Springer L	.aw Firm		
Firm name			
2222 E Sta	ite St		
Suite 107			
Rockford,	IL 61104		
Number, Street,	City, State & ZIP Code		
Contact phone	815.312.4725	Email address	dspringerlaw@gmail.com
6314059			
Parnumbar 9 C	toto		

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Fill in this infor	mation to identify your	case:		
Debtor 1	Kenyon Raymon	d Thompson		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				— 0
(II KHOWH)				☐ Check if this is an amended filing
				arrioriaca ming

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets of what you own
		value 0	n what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	5,615.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	5,615.00
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	665.60
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	16,526.01
	Your total liabilities	\$	17,191.61
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,548.76
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,479.00
Paı	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

2,012.44

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	665.60
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	665.60

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Document Page 10 of 54 Fill in this information to identify your case and this filing: Debtor 1 **Kenyon Raymond Thompson** First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chevrolet Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: Silverado 1500 Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2001 Debtor 2 only Current value of the Current value of the 166.000 Approximate mileage: entire property? Debtor 1 and Debtor 2 only portion you own? Other information: ☐ At least one of the debtors and another \$3,275.00 \$3,275.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$3,275.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the

portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

Debtor 1	Case 16-80766 Doc 1 Kenyon Raymond Thompson	Filed 03/30/16 Document	Entered 03/30/16 12:40:58 Page 11 of 54 Case number (if known)	Desc Main
_				
■ Yes	Describe			\$100.00
	Futon			\$100.00
□ No			oment; computers, printers, scanners; music o	collections; electronic devices
	TV			\$100.00
Examp ■ No	ibles of value les: Antiques and figurines; paintings, prother collections, memorabilia, collections.		oks, pictures, or other art objects; stamp, coin	, or baseball card collections;
Examp	nent for sports and hobbies les: Sports, photographic, exercise, and musical instruments Describe	other hobby equipment;	bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
■ No	ms ples: Pistols, rifles, shotguns, ammunitio Describe	n, and related equipmen	t	
□ No	es ples: Everyday clothes, furs, leather coa Describe	ts, designer wear, shoes	accessories	
	Used Clothing			\$1,500.00
■ No		, engagement rings, wed	ding rings, heirloom jewelry, watches, gems,	gold, silver
Exam	arm animals ples: Dogs, cats, birds, horses			
■ No □ Yes	Describe			
■ No	ther personal and household items you	ou did not already list, i	ncluding any health aids you did not list	
15. Add	,		ny entries for pages you have attached	\$1,700.00
	escribe Your Financial Assets			
Do you o	wn or have any legal or equitable inte	rest in any of the follow	ing?	Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 2

claims or exemptions.

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De	btor 1	Kenyon Ray	mond Th	nompson			Case number (if known)	
16.	Cash	, .						
	<i>Exampi</i> □ No	les: Money you	have in yo	ur wallet, in y	our home, in a safe	e depo	osit box, and on hand when you file your petit	ion
	_ 103							
							Cash	\$40.00
	Exampl				al accounts; certification		of deposit; shares in credit unions, brokerage titution, list each.	houses, and other similar
	□ No				Institu	ıtion n	ame.	
	Yes				msutu	ation n	ane.	
			17.1.	Checking	Miss	issip	pi Valley Credit Union	\$600.00
18.	Bonds,	mutual funds,	or publicl	y traded sto	cks			
	Examp					s, mon	ey market accounts	
	■ No □ Yes		I	Institution or i	ssuer name:			
19.	Non-pu		ock and i	nterests in i	ncorporated and u	ıninco	orporated businesses, including an interes	st in an LLC, partnership, and
	No No	enture						
	_	Give specific inf	ormation a	about them				
				ne of entity:			% of ownership:	
	Negotia Non-ne ■ No	able instruments	include pents are the comments are the c	ersonal checl hose you can	ks, cashiers' checks	s, pror	egotiable instruments missory notes, and money orders. by signing or delivering them.	
21.		nent or pension			M(ls) 400(ls) the mift of		and the same of th	alana
	<i>Exampi</i> □ No	les: Interests in	IKA, EKIS	A, Keogn, 40	11 (K), 403(D), thriπ s	saving	s accounts, or other pension or profit-sharing	pians
		_ist each accour	nt separate	elv.				
				f account:	Institu	ution n	ame:	
			401(k)	Curre	ent E	mployer	Unknown
	Your sh Example		d deposits	s you have m			tinue service or use from a company ctric, gas, water), telecommunications compa	nies, or others
	■ No □ Yes				Institu	ution n	ame or individual:	
		es (A contract fo	or a period	ic payment o	f money to you, eith	ner for	life or for a number of years)	
	■ No	le	suer name	and descrip	tion			
	☐ Yes		suel Hallie	and descrip	uon.			
	26 U.S.C	s in an education. §§ 530(b)(1),				E pro	gram, or under a qualified state tuition pr	ogram.
	■ No □ Yes	ln	stitution na	ame and des	cription. Separately	file th	ne records of any interests.11 U.S.C. § 521(c)	:
			ture inter	ests in prope	erty (other than an	ythin	g listed in line 1), and rights or powers ex	ercisable for your benefit
	No							
	☐ Yes.	Give specific inf	ormation a	about them				

Case 16-80766 Doc 1 Filed 03/30/16 Entered 03/30/16 12:40:58 Desc Main Page 13 of 54 Document Case number (if known) Debtor 1 **Kenyon Raymond Thompson** 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 2015 Tax Refund Unknown **Federal** 2015 Tax Refund Unknown State 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: **Current Employer** Randy Vetter \$0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim.......

Document Page 14 of 54 Case number (if known) Debtor 1 **Kenyon Raymond Thompson** 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$640.00 for Part 4. Write that number here...... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$3,275.00 Part 3: Total personal and household items, line 15 57. \$1,700.00 Part 4: Total financial assets, line 36 \$640.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 62. Total personal property. Add lines 56 through 61... \$5,615.00 Copy personal property total \$5,615.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$5,615.00

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this infor					
Debtor 1	Kenyon Raymon	d Thompson			
	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					- Observativities in a second
(II KIIOWII)					☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the /	Property	You	Claim	as	Exempt
---------	----------	-------	-----------------	-----	-------	----	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	Amount of the exemption you claim Specific laws that allow exe	
	Copy the value from Schedule A/B	Ched	ck only one box for each exemption.	
2001 Chevrolet Silverado 1500 166,000 miles	\$3,275.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2001 Chevrolet Silverado 1500 166,000 miles	\$3,275.00		\$875.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Futon Line from Schedule A/B: 6.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
Ellie Holli Golloddio 1722. G.1			100% of fair market value, up to any applicable statutory limit	
TV Line from Schedule A/B: 7.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
Ellie Holli Geriedale PVB.			100% of fair market value, up to any applicable statutory limit	
Used Clothing Line from Schedule A/B: 11.1	\$1,500.00		\$1,500.00	735 ILCS 5/12-1001(a)
Line from Scriedule A/D. 11.1			100% of fair market value, up to any applicable statutory limit	

Case 16-80766 Doc 1 Filed 03/30/16 Entered 03/30/16 12:40:58 Desc Main Document Page 16 of 54 Debtor 1 **Kenyon Raymond Thompson** Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Cash 735 ILCS 5/12-1001(b) \$40.00 \$40.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit **Checking: Mississippi Valley Credit** 735 ILCS 5/12-1001(b) \$600.00 \$600.00 Union Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 401(k): Current Employer 735 ILCS 5/12-1006 100% Unknown Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Federal: 2015 Tax Refund 735 ILCS 5/12-1001(b) \$1,000.00 Unknown Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit State: 2015 Tax Refund 735 ILCS 5/12-1001(b) \$300.00 Unknown Line from Schedule A/B: 28.2 100% of fair market value, up to any applicable statutory limit

3	Are you	claiming a	homestead	exemption of	more than	\$155,6757
J.	AIC YOU	Cidililiii g d	Homesteau	CACILIPLION OF	more man	Ψ 1 JJ,U1 J i

(Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.)

Ν	o

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

☐ Yes

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Fill in this infor				
Debtor 1	Kenyon Raymon	d Thompson		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				neck if this is an

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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		Document	Page 18 of	54	-	
Fill in this infor	mation to identify your c	ase:				
Debtor 1	Kenyon Raymond	Thompson				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS			
Case number						
(if known)					☐ Check	if this is an
					amend	ed filing
Official For	m 106F/F					
		ho Have Unsecured	Claime			12/15
		Part 1 for creditors with PRIORIT				
chedule D: Credieft. Attach the Co	itors Who Have Claims Secu	red Leases (Official Form 106G). I red by Property. If more space is e. If you have no information to re	needed, copy the Par	t you need, fill it out,	number the entries in	n the boxes on the
Part 1: List A	All of Your PRIORITY Uns	secured Claims				
1. Do any credit	tors have priority unsecured	I claims against you?				
☐ No. Go to	Part 2.					
Yes.						
identify what to possible, list the	ype of claim it is. If a claim has he claims in alphabetical order	If a creditor has more than one prices both priority and nonpriority amour according to the creditor's name. If ticular claim, list the other creditors	nts, list that claim here a you have more than tw	and show both priority a	and nonpriority amoun	ts. As much as
(For an explar	nation of each type of claim, se	ee the instructions for this form in the	e instruction booklet.)			
	,		,	Total claim	Priority amount	Nonpriority amount
	t of HC & Family Servi	ices Last 4 digits of accou	int number	\$665.60	\$383.00	\$282.60
Attn: B	reditor's Name Bankruptcy Dept. Buth Sixth Street	When was the debt in	ncurred?		-	
	field, IL 62701					
	Street City State Zlp Code	As of the date you file	e, the claim is: Check a	all that apply		
Who incurre	ed the debt? Check one.	☐ Contingent				
Debtor 1	only	☐ Unliquidated				
Debtor 2	only	☐ Disputed				
Debtor 1	and Debtor 2 only	Type of PRIORITY un	secured claim:			
☐ At least o	one of the debtors and another	Domestic support of	bligations			
☐ Check if	this claim is for a communi	ity debt Taxes and certain o	other debts you owe the	government		
Is the claim	subject to offset?	☐ Claims for death or	personal injury while yo	ou were intoxicated		
■ No		Other. Specify				
☐ Yes		B	ack Child Suppor	rt		

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Debt	or 1 Kenyon Raymond Thompson	Case number (if know)	
2.2	Isabell Roberts	Last 4 digits of account number \$0.00	\$0.00 \$0.00
	Priority Creditor's Name 1515 Eldena Road Dixon, IL 61021	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:	
	☐ At least one of the debtors and another	■ Domestic support obligations	
	☐ Check if this claim is for a community debt Is the claim subject to offset? No	☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify	
	☐ Yes	Child Support	
4. L u th	nsecured claim, list the creditor separately for each cl	alphabetical order of the creditor who holds each claim. If a creditor has more that aim. For each claim listed, identify what type of claim it is. Do not list claims already increditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more
			Total claim
4.1	Associated Gastroenterology Co.	Last 4 digits of account number	\$118.80
,	Nonpriority Creditor's Name 530 Park Avenue East Princeton. IL 61356	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other Specify Medical Bills	

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Kenyon Raymond Inompson	Case number (if know)	
Central Illinois Radiological Assoc	Last 4 digits of account number	\$95.84
114 W. Stratford Drive	When was the debt incurred?	
	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only		
	Type of NONPRIORITY unsecured claim:	
<u> </u>	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Bills	
CGH Medical Center	Last 4 digits of account number	\$1,071.83
15 W. 3rd Street	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Bills	
Collection Professionals Inc.	Last 4 digits of account number	\$707.00
PO Box 416	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Collecting for Creditor	
	Central Illinois Radiological Assoc Nonpriority Creditor's Name 114 W. Stratford Drive Peoria, IL 61614 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes CGH Medical Center Nonpriority Creditor's Name 15 W. 3rd Street Sterling, IL 61081 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Collection Professionals Inc. Nonpriority Creditor's Name PO Box 416 La Salle, IL 61301 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Collection Professionals Inc. Nonpriority Creditor's Name PO Box 416 La Salle, IL 61301 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	Central Illinois Radiological Assoc Nonpriority Creditor's Name 114 W. Strafford Drive Peoria, IL 61614 Number Sireer City State Zip Code Who incurred the debt? Check one. Contingent Contingent

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Gastroenterology Consultants	Last 4 digits of account number	\$27
Nonpriority Creditor's Name 545 Valley View Drive Moline, IL 61265	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Bills	
Julie Lucas	Last 4 digits of account number	\$2,60
Nonpriority Creditor's Name 6500 2440 North Avenue Walnut, IL 61376	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Eviction	
Near Automotive Repair	Last 4 digits of account number	\$80
Nonpriority Creditor's Name 618 E. Rock Falls Road	When was the debt incurred?	,
Rock Falls, IL 61071 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The of the date year me, the damine. Onesk an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Auto Repairs	

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Nicor Gas	Last 4 digits of account number	\$1,404.35
Nonpriority Creditor's Name P.O. Box 190 Aurora, IL 60507	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Utilities	
Peoria Tazewell Pathology Group	Last 4 digits of account number	\$54.41
Nonpriority Creditor's Name 1100 W Glen Ave # 400	When was the debt incurred?	
Peoria. IL 61614	when was the debt incurred:	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical Bills	
Perry Memorial Hospital	Last 4 digits of account number	\$4.605.13
Nonpriority Creditor's Name		
530 Park Avenue	When was the debt incurred?	
Princeton, IL 61356 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The state grade grade and statement of the state appropriate appro	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Medical Bills	

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Desc Main Document Page 23 of 54 Case number (if know) Debtor 1 Kenyon Raymond Thompson 4.1 **Progressive Insurance** Unknown Last 4 digits of account number Nonpriority Creditor's Name 6300 Wilson Mills Road When was the debt incurred? Cleveland, OH 44143 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Insurance ☐ Yes 4.1 State Farm Insurance \$4,304.16 Last 4 digits of account number 2 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? One State Farm Plaza Bloomington, IL 61710 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Auto Accident ☐ Yes 4.1 Sterling Rock Falls Clinic Ltd. \$48.87 Last 4 digits of account number Nonpriority Creditor's Name 10 West 3rd Street When was the debt incurred? Sterling, IL 61081 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes

☐ Student loans

report as priority claims

debt

Type of NONPRIORITY unsecured claim:

 \square Obligations arising out of a separation agreement or divorce that you did not

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

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Debto	or 1 Kenyon Raymond Thompson	Document Page 24 of 54 Case number (if know)	
4.1	Thompson Chiropractic Clinic	Last 4 digits of account number	\$327.84
	Nonpriority Creditor's Name 728 E Veterans Pkwy # 115 Yorkville, IL 60560	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Bills	
4.1	Tri-County Radiologists	Last 4 digits of account number	\$17.28
	Nonpriority Creditor's Name 5409 N Knoxville Ave Peoria, IL 61614	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills	
4.1	Whiteside County Comm Health		
6	Clinic	Last 4 digits of account number	\$96.00
	Nonpriority Creditor's Name 1300 West Second Street Rock Falls, IL 61071	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is far a community	☐ Student loans	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

■ Other. Specify Medical Bills

Name and Address

debt

■ No

☐ Yes

On which entry in Part 1 or Part 2 did you list the original creditor?

 \square Obligations arising out of a separation agreement or divorce that you did not

 \square Debts to pension or profit-sharing plans, and other similar debts

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

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Case number (if know)

Renyon Raymond Thompson		Case number (ii know)
Allied Business Accounts Attn: Bankruptcy Dept. 300 1/2 S. 2nd Street PO Box 1600 Clinton, IA 52733-1600	Line 4.10 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
•	Last 4 digits of account number	
Name and Address Asset Acceptance Corporation Attn: Bankruptcy Dept. PO Box 2036 Warren, MI 48090	On which entry in Part 1 or Part 2 did Line 4.8 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
waiten, wii 40050	Last 4 digits of account number	
Name and Address Bureau County Clerk of Court 700 South Main Street 2013 SC 527 Princeton, IL 61356	On which entry in Part 1 or Part 2 did Line 4.6 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Bureau County Clerk of Court 700 South Main Street 2007 SC 571 Princeton, IL 61356	On which entry in Part 1 or Part 2 did Line 4.4 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Bureau County Clerk of Court 700 South Main Street 2002 D 117 Princeton, IL 61356	On which entry in Part 1 or Part 2 did Line 2.1 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
· · · · · · · · · · · · · · · · · · ·	Last 4 digits of account number	
Name and Address Bureau County Clerk of Court 700 South Main Street 1993 D 46 Princeton, IL 61356	On which entry in Part 1 or Part 2 did Line 2.1 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number	
Name and Address CB Accounts 124 SW Adams St. Peoria, IL 61602	On which entry in Part 1 or Part 2 did Line 4.5 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Collection Professionals Inc. PO Box 416 La Salle, IL 61301	On which entry in Part 1 or Part 2 did Line 4.10 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Collection Professionals Inc. PO Box 416 La Salle, IL 61301	On which entry in Part 1 or Part 2 did Line 4.14 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Equifax PO Box 740256 Atlanta, GA 30374	On which entry in Part 1 or Part 2 did Line 4.3 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Experian PO Box 4500 Allen, TX 75013	On which entry in Part 1 or Part 2 did Line 4.3 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

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Name and Add Johnson, I PO Box 33 Peoria, IL (Bunce & Noble PC 22	On which entry in Part 1 or Part 2 did Line 4.9 of (<i>Check one</i>): Last 4 digits of account number	☐ Part 1:	Creditors with	or? n Priority Unsecured Claims n Nonpriority Unsecured Claims		
Name and Add Michael He 4018 S. Ma Princeton,	enneberry in Street		Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address Pioneer Credit Recovery Inc. 197 SW Waterford Court Lake City, FL 32025		On which entry in Part 1 or Part 2 did Line 2.1 of (<i>Check one</i>): Last 4 digits of account number	Part 1:	or? n Priority Unsecured Claims n Nonpriority Unsecured Claims			
	ount Management ruptcy Dept. rd Street	On which entry in Part 1 or Part 2 did Line 4.3 of (<i>Check one</i>): Last 4 digits of account number	☐ Part 1:	Creditors with	or? n Priority Unsecured Claims n Nonpriority Unsecured Claims		
	ount Management ruptcy Dept. rd Street	On which entry in Part 1 or Part 2 did Line 4.13 of (Check one): Last 4 digits of account number	☐ Part 1:	Creditors with	or? n Priority Unsecured Claims n Nonpriority Unsecured Claims		
	n & Associates Inc. Street, Suite 110	On which entry in Part 1 or Part 2 did Line 4.12 of (Check one): Last 4 digits of account number	☐ Part 1:	Creditors with	or? n Priority Unsecured Claims n Nonpriority Unsecured Claims		
Name and Add T-H Profes Collection PO Box 10 Peoria, IL (sional and Med 166	On which entry in Part 1 or Part 2 did Line 4.2 of (<i>Check one</i>): Last 4 digits of account number	☐ Part 1:	Creditors with	or? n Priority Unsecured Claims n Nonpriority Unsecured Claims		
Name and Add T-H Profes Collection PO Box 10 Peoria, IL 0	sional and Med 166	On which entry in Part 1 or Part 2 did Line 4.15 of (Check one): Last 4 digits of account number	☐ Part 1:	Creditors with	or? n Priority Unsecured Claims n Nonpriority Unsecured Claims		
Name and Address TransUnion 555 West Adams Street Chicago, IL 60661		On which entry in Part 1 or Part 2 did Line 4.3 of (Check one): Last 4 digits of account number	☐ Part 1:	Creditors with	or? n Priority Unsecured Claims n Nonpriority Unsecured Claims		
6. Total the an	dd the Amounts for Each Type nounts of certain types of unsecure cured claim.		cal reporting	purposes o	nly. 28 U.S.C. §159. Add the amounts for each		
Total claims	6a. Domestic support oblig		6a.	\$	Total Claim 665.60		
from Part 1		debts you owe the government sonal injury while you were intoxicated	6b. 6c.	\$ \$	0.00		

Official Form 106 E/F

6d. Other. Add all other priority unsecured claims. Write that amount here.

Debtor 1 Kenyon Raymond Thompson

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Debtor 1 Kenyon Raymond Thompson

Total Nonpriority. Add lines 6f through 6i.

Total claims from Part 2

0.00 Total Priority. Add lines 6a through 6d. 6e. 665.60 **Total Claim** Student loans 6f. 6f. 0.00 Obligations arising out of a separation agreement or divorce that 0.00 6g. you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 6h. 6h. 0.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount 16,526.01

6j.

16,526.01

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Fill in this infor	Fill in this information to identify your case:							
Debtor 1	Kenyon Raymon	d Thompson						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS					
Case number								
(if known)				☐ Che				
				ame				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	<u> </u>		Oldio	211 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

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		Docume	ent Page 29 d	of 54	
Fill in thi	s information to identify your	case:			
Debtor 1	Kenyon Raymon	d I hompson Middle Name	Last Name		
D-64 0	Filst Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f	iling) First Name	Middle Name	Last Name		
(
United St	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
_					
Case nur	nber				☐ Check if this is an
(ii kilowii)					☐ Check if this is an amended filing
					amended ming
Officia	al Form 106H				
Sche	dule H: Your Cod	ebtors			12/15
your nam	and number the entries in the eard case number (if known or you have any codebtors? (If). Answer every question			any Additional Pages, write
	(,			
■ No	o				
□Y€	es				
	ithin the last 8 years, have you				ates and territories include
Arizo	ona, California, Idaho, Louisiana	, Nevada, New Mexico, Pu	erto Rico, Texas, vvasn	ington, and vvisconsin.)	
■ N/	o. Go to line 3.				
	es. Did your spouse, former spo	use or legal equivalent live	with you at the time?		
— 16	es. Dia your spouse, former spo	use, or legal equivalent live	e with you at the time:		
in lin Form	ne 2 again as a codebtor only in 106D), Schedule E/F (Officia	if that person is a guaran	tor or cosigner. Make	sure you have listed the o	ith you. List the person shown reditor on Schedule D (Official nedule E/F, or Schedule G to fill
out (Column 2.				
	Column 1: Your codebtor			Column 2: The credite	or to whom you owe the debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedules th	
				_	
3.1				Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		
3.2				Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to identify your c	ase:									
Del	otor 1 Kenyon Ray	mond Thompson			_						
	otor 2				_						
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_						
	se number lown)		-			□ Ar			0 1	petition chap g date:	oter
0	fficial Form 106I					M	M / DD/ Y	YYY			
S	chedule I: Your Inc	ome									12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	ır spouse is not filing w	ith you, do not includ	le infori	natio	on about	your spo	use. If mo	ore spa	ace is need	ed,
1.	Fill in your employment information.		Debtor 1	Debtor 1			Debtor 2	or non-fi	iling sp	oouse	
	If you have more than one job,	Employment status	■ Employed				☐ Emplo	yed			
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not er	mployed			
	employers.	Occupation	Maintenance								
	Include part-time, seasonal, or self-employed work.	Employer's name	Herman & Kittle Properties Inc.								
	Occupation may include student or homemaker, if it applies.	Employer's address	500 East 96th St Indianapolis, IN		uite	300					
		How long employed t	here?				_				
Par	t 2: Give Details About Mor	nthly Income									
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	port for	any l	line, write	\$0 in the	space. Ind	clude y	our non-filin	g
	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	for all e	emplo	oyers for t	hat perso	n on the li	nes be	low. If you n	eed
						For Deb	tor 1	For De			
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2,	149.33	\$		N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$		N/A	

2,149.33

\$

N/A

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Kenyon Raymond Thompson	_	Ca	ase number (if kn	own)				
				F	For Debtor 1			Debtor 2		
	Con	y line 4 here	4.	9	2,149	133	\$	-filing sp	N/A	
				,	2,173		<u> </u>		11//	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.			.52	\$		N/A	_
	5b.	Mandatory contributions for retirement plans	5b.		·	0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.			0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d.			0.00	\$		N/A	_
	5e.	Insurance	5e.		. ———	3.85	\$		N/A	_
	5f. 5g.	Domestic support obligations Union dues	5f. 5g.	,	:	0.00	\$		N/A N/A	_
	5g. 5h.	Other deductions. Specify: Life Insurance	5g. 5h.		·	2.39	+ \$		N/A N/A	_
	JII.	Disability		. ' ' \$. ———	33	\$		N/A	_
_	A -1 -1			,			· : —			_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$).57	\$		N/A	=
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,548	3.76	\$		N/A	-
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	8a.	. 9	1		¢		N 1/A	
	8b.	monthly net income. Interest and dividends	8b.		·	0.00	\$ \$		N/A N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.				0.00	\$ \$		N/A	-
	8d.	Unemployment compensation	8d.		·	0.00	\$		N/A	_
	8e.	Social Security	8e.	. \$		0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	,	·	0.00	\$		N/A	_
	8g.	Pension or retirement income	8g.		,	0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	8h.	.+ \$	□	0.00	+ \$		N/A	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0	0.00	\$		N/A	A
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	1,548.76	+ \$		N/A	= \$	1,548.76
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		т—	1,040.70	- * -		-14/4	-	1,040.70
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule adde contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe		. •		•	Schedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certalies						12.	\$	1,548.76
40	D	very average on increase or decrease within the constitution of the constitution of						,	monthl	y income
13.	□ □	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	l f							

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Fill in	this informa	tion to identify yo	our case:					
Debtor		Kenyon Ray		ompson		Che	eck if this is:	
Debtoi		Kellyoli Kay	mona m	ompson			An amended filing	
Debtor (Spous	r 2 se, if filing)							wing postpetition chapter the following date:
``	. 0,							
United	States Bankr	uptcy Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Case n	number wn)							
		rm 106J						
		J: Your						12/1
inforn	nation. If m		eded, atta	. If two married people ar ich another sheet to this n.				
Part 1		ibe Your House	ehold					
_	s this a joir							
	No. Go to		in a sonar	ate household?				
	res. Doe N 🏻		iii a Sepai	ate nousenoid?				
			st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Del	btor 2.	
2. [Do vou have	e dependents?	■ No					
	Do not list D	•	☐ Yes.	Fill out this information for	Dependent's relat	ionship to	Dependent's	Does dependent
	Debtor 2.	obtor r and	□ res.	each dependent	Debtor 1 or Debto		age	live with you?
	Do not state							□ No
d	dependents	names.						☐ Yes
								□ No □ Yes
							_	□ No
								☐ Yes
								□ No
								☐ Yes
	, ,	enses include f people other t	han	No				
		d your depende		Yes				
Part 2	Estim	ate Your Ongoi	na Month	lv Expenses				
Estim exper	ate your ex	penses as of y	our bankr	uptcy filing date unless y y is filed. If this is a supp	ou are using this followed are using the following the second sec	orm as a s J, check t	upplement in a Cha the box at the top o	apter 13 case to report of the form and fill in the
the va		n assistance an		government assistance i cluded it on <i>Schedule I:</i>)			Your exp	enses
`		,						
		or home owners and any rent for th		ses for your residence. I or lot.	nclude first mortgag	e 4.	\$	350.00
H	f not includ	led in line 4:						
4	1a. Real e	estate taxes				4a.	\$	0.00
	•	rty, homeowner's				4b.	·	0.00
				upkeep expenses		4c.		50.00
		owner's associa nortgage paym		dominium dues our residence, such as ho	me equity loans	4d. 5.	·	0.00 0.00

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ebtor 1	Kenyon Raymond Thompson	Case num	ber (if known)	
. Utilit	riae:			
. O tilit 6a.	Electricity, heat, natural gas	6a.	\$	0.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	
6d.			·	105.00
	Other. Specify:	6d.	·	0.00
	d and housekeeping supplies	7.	·	350.00
Child	dcare and children's education costs	8.	\$	0.00
Clot	hing, laundry, and dry cleaning	9.	\$	75.00
). Pers	onal care products and services	10.	\$	65.00
. Medi	ical and dental expenses	11.	\$	20.00
	sportation. Include gas, maintenance, bus or train fare.	40	Φ.	225.00
	ot include car payments.	12.	·	225.00
. Ente	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
. Char	ritable contributions and religious donations	14.	\$	0.00
. Insu				
	ot include insurance deducted from your pay or included in lines 4 or 20.			
15a.	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	89.00
15d.	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		·	0.00
Spec	cify:	16.	\$	0.00
	allment or lease payments:			
	Car payments for Vehicle 1	17a.	·	0.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as	 18.	e	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	·	
	er payments you make to support others who do not live with you.	19.	\$	0.00
Spec	त्रापृ. er real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e			
	Mortgages on other property	20a.		0.00
			· -	
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
. Othe	er: Specify: Miscellaneous, Birthdays, Holidays, Haircuts	21.	+\$	100.00
. Calc	ulate your monthly expenses			
	Add lines 4 through 21.		\$	1,479.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	1,410.00
			·	4 470 00
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	1,479.00
	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,548.76
	Copy your monthly expenses from line 22c above.	23b.	-\$	1,479.00
	100		· 	.,
23c.	Subtract your monthly expenses from your monthly income.			20 = 2
	The result is your monthly net income.	23c.	\$	69.76
4 Do v	ou expect an increase or decrease in your expenses within the year after yo	u file this	form?	
	xample, do you expect to finish paying for your car loan within the year or do you expect your			or decrease because c
	ication to the terms of your mortgage?	9~901	,	
■ N	0.			

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Fill in this info	rmation to identify your	case.			
Debtor 1	Kenyon Raymond	Niddle Name	Last Name		
Debtor 2	riotrano	Wildele Harrie	Edot Hamo		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
Official For		ın Individual	Dobtor's S	ah adulas	
Declara	HOH ADOUL 6	<u> </u>	Debiol 3 3	ciledules	12/15
years, or both. 1	gn Below	519, and 3571.	Tupley case can result	m mes up to \$250,00	0, or imprisonment for up to 20
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules fil	ed with this declaratio	n and
X /s/ Ke	nyon Raymond Thom	inson	Х		
	on Raymond Thomps		Signature o	of Debtor 2	
	ure of Debtor 1	-	U		
Date	March 30, 2016		Date		

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Fill	in this inform	ation to identify you	r case:						
Deb	otor 1	Kenyon Raymor	nd Thompson Middle Name	Last Name					
	otor 2 use if, filing)	First Name	Middle Name	Last Name					
Uni	ted States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS					
	se number					Check if this is an amended filing			
Sta	s complete a	of Financial		are filing together, both a	re equally responsible for su				
		ore space is needed,). Answer every que:		this form. On the top of a	any additional pages, write y	our name and case			
Par	t 1: Give D	etails About Your Ma	arital Status and Where Yo	u Lived Before					
1.	What is your	current marital statu	ıs?						
	□ Married■ Not marr	ied							
2.	During the la	st 3 years, have you lived anywhere other than where you live now?							
	■ No □ Yes. List	all of the places you I	ived in the last 3 years. Do r	not include where you live n	ow.				
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior	Address:	Dates Debtor 2 lived there			
3. state					unity property state or territo Rico, Texas, Washington and				
	■ No □ Yes. Mal	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (C	Official Form 106H).					
Par	t 2 Explain	the Sources of You	r Income						
4.	Fill in the total	amount of income yo	nployment or from operati u received from all jobs and have income that you receiv	all businesses, including pa		endar years?			
	□ No ■ Yes. Fill	in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,982.20	Wages, commissions, bonuses, tips				
			☐ Operating a business		☐ Operating a business				

Official Form 107

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Debtor				Debtor 1	r1		Debtor 2			
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.		Gross income (before deductions and exclusions)		
			31, 2015)	■ Wages, commissions, bonuses, tips	ssions, \$27,941.40					
				☐ Operating a business		☐ Operating a	business			
				■ Wages, commissions, bonuses, tips	, сотиновото,			commissions,		
				☐ Operating a business		☐ Operating a	business			
 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Secur and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and ga winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. 										
				Debtor 1	Debtor 2					
			Sources of income Describe below	ources of income Gross income		Sources of income Describe below. Gross income (before deductions and exclusions)				
Pa	rt 3: Lis	st Certain Pa	yments You	u Made Before You Filed for	Bankruptcy					
6.	Are either Debtor 1's or Debtor 2's debts primarily consumer debts? ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by individual primarily for a personal, family, or household purpose."									
		During the No.	Go to line List below	fore you filed for bankruptcy, di 7. each creditor to whom you pai creditor. Do not include paymer	d a total of \$6,225* or more	in one or more pay	yments and			
	not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.									
	■ Yes	Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?								
		□ _{No.}	Go to line	7.						
		■ Yes	List below include pa	each creditor to whom you pai yments for domestic support o or this bankruptcy case.						
	Creditor's Name and Address			Dates of payme	ent Total amount paid	Amount you still owe	Was this	payment for		
	Near Automotive Repair 618 East Rock Falls Road Rock Falls, IL 61071			1/2016 - 3/201	6 \$1,400.00	\$800.00				

■ Other Auto Repair

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7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. A alimony.	artners; relatives of any ger n control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one for
	No					
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer a	any property on a	ccount of a d	ebt that benefited an
	No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Pai	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. ■ No □ Yes. Fill in the details.					
	Case title	Nature of the case	Court or agency		Status of th	ne case
	Case number		,			
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo ■ No □ Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	shed, attached	d, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened	d			property
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No Yes. Fill in the details.	ptcy, did any creditor, inc		nancial institutior	n, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess			efit of creditors, a
Pa	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gift	s with a total value	of more than \$60	00 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date: the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

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18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not

include gifts and transfers that you have already listed on this statement.

Yes. Fill in the details.

Person Who Received Transfer Address

Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

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Debtor 1 **Kenyon Raymond Thompson**

19.	Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-protection)		ny property to a	a self-settle	d trust or similar device	of which you are a
	■ No □ Yes. Fill in the details.					
	Name of trust	Description and	value of the pro	perty trans	sferred	Date Transfer was made
Pa	rt 8: List of Certain Financial Accounts, Instr	uments, Safe Deposi	it Boxes, and S	torage Unit	ts	
20.	sold, moved, or transferred? Include checking, savings, money market, or or houses, pension funds, cooperatives, associa No	other financial accou	nts; certificate	s of deposi		, ,
	Yes. Fill in the details.				_	
		ast 4 digits of ccount number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed fo	r bankruptcy, a	ıny safe de _l	posit box or other depos	itory for securities,
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or	nlace other than you	r home within 1	l vear hefoi	re you filed for hankrunt	CV
	riave you stored property in a storage unit or p	place other than you	i nome within	i year bero	re you med for bankrupt	cy
	No					
	Yes. Fill in the details.			_		
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
Pa	rt 9: Identify Property You Hold or Control fo	r Someone Else				
23.	Do you hold or control any property that some for someone.	eone else owns? Incl	ude any prope	rty you bor	rowed from, are storing	for, or hold in trust
	■ No					
	☐ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value
Da	rt 10: Give Details About Environmental Inform	mation				
For	the purpose of Part 10, the following definition	s apply:				
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these so	air, land, soil, surfac	e water, groun	• .	•	
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa	-	environmental	law, wheth	er you now own, operate	e, or utilize it or used
	Hazardous material means anything an enviro		as a hazardous	s waste, ha	zardous substance, toxi	ic substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

hazardous material, pollutant, contaminant, or similar term.

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Debtor 1 **Kenyon Raymond Thompson**

24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of a	any release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adm	inistrative proceeding under any envir	onmental law? Include settlements a	nd orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	11: Give Details About Your Business or C	Connections to Any Business						
27.	Within 4 years before you filed for bankrupto	cy, did you own a business or have any	y of the following connections to any	business?				
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing exe	ecutive of a corporation						
	☐ An owner of at least 5% of the voting	or equity securities of a corporation						
	■ No. None of the above applies. Go to P	art 12.						
	Yes. Check all that apply above and fill	in the details below for each business.						
	Business Name	Describe the nature of the business	Employer Identification number					
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security n	umber or IIIN.				
28.	Within 2 years before you filed for bankruptoinstitutions, creditors, or other parties.	cy, did you give a financial statement to	o anyone about your business? Inclu	de all financial				
	■ No							
	Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued						

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Debtor 1 **Kenyon Raymond Thompson**

Part 12: Sign Below	this Statement of Eineneigl	fairs and any attachments, and I declare under penalty of perjury that the answers
are true and correct. I under	stand that making a false st	ement, concealing property, or obtaining money or property by fraud in connection or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519		p
/s/ Kenyon Raymond Th	ompson	
Kenyon Raymond Thom	pson	Signature of Debtor 2
Signature of Debtor 1		
Date March 30, 2016		Date
Did you attach additional pa	ges to Your Statement of Fi	ancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
No		
□ Yes		
Did you pay or agree to pay	someone who is not an atto	ney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify y	our case:		
Debtor 1	Kenyon Raym	ond Thompson		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for th	ne: NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(if known)				☐ Check if this is an
				amended filing
Official Fo	rm 108			
		ion for Individu	als Filing Under	Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□No
name:	Retain the property and redeem it.	_
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Kenyon Raymond Thompson	Case number (if known)	
name: Descrip propert securin	y	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes
Securifi	ig debt.		-
For any ui	rmation below. Do not list real estate leases.	es led in Schedule G: Executory Contracts and Unexpired Unexpired leases are leases that are still in effect; the le if the trustee does not assume it. 11 U.S.C. § 365(p)(2)	lease period has not yet ended.
Describe	your unexpired personal property leases		Will the lease be assumed?
Lessor's r			□ No
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No
Lessor's r Description Property:	name: on of leased		□ No
Lessor's r Description Property:	name: on of leased		□ No
Lessor's r Description Property:	name: on of leased		□ No
Lessor's r Description Property:	name: on of leased		□ No
Part 3:	Sign Below		□ Tes
	nalty of perjury, I declare that I have indicated hat is subject to an unexpired lease.	my intention about any property of my estate that sec	ures a debt and any personal
	Kenyon Raymond Thompson	X	
	yon Raymond Thompson ature of Debtor 1	Signature of Debtor 2	
Date	March 30, 2016	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-80766 Doc 1 Filed 03/30/16 Entered 03/30/16 12:40:58 Desc Main Document Page 48 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In	re Kenyon Raymond Thompson		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	NSATION OF ATTOR	NEY FOR DI	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy,	or agreed to be paid	to me, for services ren	ndered or to
	For legal services, I have agreed to accept		\$	500.00	
	Prior to the filing of this statement I have received.			500.00	
	Balance Due			0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person t	unless they are mem	bers and associates of	my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the national control of the state of the national control of the state of				w firm. A
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspects	of the bankruptcy of	ease, including:	
	a. Analysis of the debtor's financial situation, and rendeb. Preparation and filing of any petition, schedules, statc. Representation of the debtor at the meeting of credited. [Other provisions as needed]	tement of affairs and plan which	may be required;	-	uptcy;
	Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho	ons as needed; preparation			
6.	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any dis- any other adversary proceeding.	ee does not include the following schargeability actions, judic	service: cial lien avoidanc	es, relief from stay	actions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of an s bankruptcy proceeding.	ny agreement or arrangement for	payment to me for r	epresentation of the de	btor(s) in
	March 30, 2016	/s/ Daniel A. Sprin	ger		
•	Date	Daniel A. Springe			
		Signature of Attorney Springer Law Firn			
		2222 E State St			
		Suite 107 Rockford, IL 6110	4		
		815.312.4725			
		dspringerlaw@gn	nail.com		
		Name of law firm			

Desc Main

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Springer Law Firm

2222 East State St. # 107, Rockford, IL

815.312,4275

CHAPTER 7 RETAINER AGREEMENT

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- 1. The attorney fees for the Chapter 7 bankruptcy are \$500. This is a flat fee arrangement, and does not include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law Firm will not charge you for additional work. However, if you refuse to cooperate, or fall to provide information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I easign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankrupney code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold. Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 benkruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fixed, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may full under the bankruptcy case. This agreement does not include representation in such adversary proceedings.
- 7. I understand that all money paid towards attorney fees is non-refundable. I understand that once I pay Springer Law, that Springer Law begins work on my case. I understand that the majority of bankruptcy work is done prior to the filing of the case, and because of this the fees are earned even before the filing of the case.
- I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer
 Law Firm and consult on the impact such action will have on my bankruptcy.
- 9. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.

10. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated: 10-30-2015

Signature: Kanyon R. Thony

Print Name: Kenvon R Thompson

Attorney Signature:

Attorney Frim

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United States Bankruptcy CourtNorthern District of Illinois

In re	Kenyon Raymond Thompson		Case No.	
		Debtor(s)	Chapter _	7
	VE	RIFICATION OF CREDITOR MA	ATRIX	
		Number of C	Creditors:	34
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditor	rs is true and co	orrect to the best of my
Date:	March 30, 2016	/s/ Kenyon Raymond Thompson Kenyon Raymond Thompson	n	

Allied Business Accounts Attn: Bankruptcy Dept. 300 1/2 S. 2nd Street PO Box 1600 Clinton, IA 52733-1600

Asset Acceptance Corporation Attn: Bankruptcy Dept. PO Box 2036 Warren, MI 48090

Associated Gastroenterology Co. 530 Park Avenue East Princeton, IL 61356

Bureau County Clerk of Court 700 South Main Street 2013 SC 527 Princeton, IL 61356

Bureau County Clerk of Court 700 South Main Street 2007 SC 571 Princeton, IL 61356

Bureau County Clerk of Court 700 South Main Street 2002 D 117 Princeton, IL 61356

Bureau County Clerk of Court 700 South Main Street 1993 D 46 Princeton, IL 61356

CB Accounts 124 SW Adams St. Peoria, IL 61602

Central Illinois Radiological Assoc 114 W. Stratford Drive Peoria, IL 61614

CGH Medical Center 15 W. 3rd Street Sterling, IL 61081 Collection Professionals Inc. PO Box 416 La Salle, IL 61301

Equifax PO Box 740256 Atlanta, GA 30374

Experian PO Box 4500 Allen, TX 75013

Gastroenterology Consultants 545 Valley View Drive Moline, IL 61265

IL Dept of HC & Family Services Attn: Bankruptcy Dept. 509 South Sixth Street Springfield, IL 62701

Isabell Roberts 1515 Eldena Road Dixon, IL 61021

Johnson, Bunce & Noble PC PO Box 3322 Peoria, IL 61612

Julie Lucas 6500 2440 North Avenue Walnut, IL 61376

Michael Henneberry 4018 S. Main Street Princeton, IL 61356

Near Automotive Repair 618 E. Rock Falls Road Rock Falls, IL 61071

Nicor Gas P.O. Box 190 Aurora, IL 60507 Peoria Tazewell Pathology Group 1100 W Glen Ave # 400 Peoria, IL 61614

Perry Memorial Hospital 530 Park Avenue Princeton, IL 61356

Pioneer Credit Recovery Inc. 197 SW Waterford Court Lake City, FL 32025

Progressive Insurance 6300 Wilson Mills Road Cleveland, OH 44143

RRCA Account Management Attn: Bankruptcy Dept. 201 East 3rd Street Sterling, IL 61081

State Farm Insurance Attn: Bankruptcy Dept. One State Farm Plaza Bloomington, IL 61710

Sterling Rock Falls Clinic Ltd. 10 West 3rd Street Sterling, IL 61081

Stuart Allen & Associates Inc. 5447 E. 5th Street, Suite 110 Tucson, AZ 85711

T-H Professional and Med Collection PO Box 10166 Peoria, IL 61612

Thompson Chiropractic Clinic 728 E Veterans Pkwy # 115 Yorkville, IL 60560

TransUnion 555 West Adams Street Chicago, IL 60661 Tri-County Radiologists 5409 N Knoxville Ave Peoria, IL 61614

Whiteside County Comm Health Clinic 1300 West Second Street Rock Falls, IL 61071